

## **Minutes of the Health and Human Services Board Meeting**

**Thursday, May 7, 2009**

**Board Members Present:** Citizen Members Dennis Farrell (Chair), Flor Gonzalez, Mike O'Brien, Dr. Peter Geiss, Joe Vitale, County Board Supervisors Duane Paulson, Janel Brandtjen, Jim Jeskewitz. **Absent:** JoAnn Weidmann and Paul Decker.

**Others Present:** County Executive Dan Vrakas, Health and Human Services Director Peter Schuler.

### **Luncheon**

County Executive Dan Vrakas joined Health and Human Services Director Peter Schuler and members of the Health and Human Services Board for lunch at 11:30 a.m.

### **Presentation to County Executive Vrakas Board's 2010 Budget Recommendations**

Following lunch, the official meeting was called to order at 12:04 p.m. A letter was sent to the County Executive from Chair Farrell on behalf of the board along with a copy of the 2010 Budget Recommendations of the Health and Human Services Board. All members were previously provided a copy of this letter and the finalized recommendations. Farrell began by reiterating the primary priority which would allow for funding in the 2010 budget to maintain existing services, availability of new psychopharmaceuticals to avoid out of home placements, institutional, and other deep end costs. Farrell suggested that liaisons of the advisory committees speak on behalf of any need that pertained to that Advisory Committee. Brandtjen commented on Priority #1 regarding maintaining Level II status for the Public Health Division. If the Public Health Division drops to a Level I not only will we see a loss in funding to perform the duties, but other entities will be impacted such as Police, Fire, 211, etc. and it will become more of a drain on the community financially. The dramatic cuts would greatly affect the lives of citizens in Waukesha County. There were 29 people at the Public Hearing who thanked Health and Human Services for what they had done to help them become more responsible individuals and able to take care of themselves as well as their families. The deep end costs are much greater than intervention funding. She asked at what point are we spending money to go backwards.

Joe Vitale, Liaison to the Children and Families Advisory Committee stated he agreed with Janel. There really is another concern. Our county should be very pleased with the intervention/prevention programs we have in order to avoid the deep end costs. He sees members of CAFSAC pull out because they can't afford to be with us anymore. For instance, Lutheran Social Services took a \$70,000 cut several years ago and now the agencies are competing with each other for fundraisers in order to sustain their level of services. The demand for dollars exceeds the supply and how do we get around that. He also expressed concern that it's going to cost us more in the long run without these prevention and early intervention services. As an example, he questioned if a young man is worked with and the county spends \$7,000 isn't that a money saver rather than the judge sending him to Ethan Allen at a cost of \$90,000/year? He believes we have to keep the agencies involved in CAFSAC to keep the intervention/prevention services those agencies provide. Priorities 2,3,4, and 5 are all in the Mental Health area. It was noted that with a little investment today, all these programs save a lot

in the long run. If we don't provide for a cost of living adjustment to residential providers of citizens who are chronically mentally ill, then we will end up searching for another provider and we will end up spending more money as they will deteriorate as has been proven in the past. Maintaining funding to 211 is included in the Board's overall priority which is the continuation of services. Expanding respite services to children who are severely emotionally disturbed prevents parents from becoming overwhelmed and avoid foster care or an institutional placement. The peer support program came forward at the public hearing as it has enabled people to make major changes in their lives in order to become responsible citizens in this community.

Mike O'Brien spoke on behalf of Priority #6 and #7 which supports the goals and programs of the Criminal Justice Collaborating Council including the Alcohol Treatment Court, AODA programming in the jail and Huber and the Day Report Center. The AODA Advisory Committee sees the Day Report Center as an investment in people getting out of jail. It brings together all those stakeholders that are in a position to help, i.e. Workforce Development, Probation and Parole, job training resources, peer support, trying to find housing for these folks to give them a running head start. It is an investment in the future. People are given an opportunity for a new start and to not go back to their old environment. Paulson stated that it is so important to keep people out of the jail and work on early intervention. Vrakas stated that there was a graduation this past week of young people in the Alcohol Treatment Court program and he could see that they will not likely go back because we got them in the early stages. O'Brien stated that any inmates that involve themselves in any kind of programs always do better. Brandtjen asked if we could approach SOPHIA and ask for support. Can we challenge them to help with funding? She asked if we can discuss this for this coming year. Give them a dollar amount and see if they can collect from their congregation – in fact all churches. Vrakas stated we have a huge crisis because of the State budget as it stands at this point. O'Brien stated that there are a lot of groups like SOPHIA and churches, but the problem is they don't talk to each other and are aware of what others are doing. SOPHIA is a consortium of members from various churches (12) and they look for social justice through policy changes. They were very much an advocate of the Alcohol Treatment Court. SOPHIA are volunteers and one of their services is to provide Wisconsin Community Services with reward cards for clients.

Jeskewitz asked if we ever looked into Wisconsin's penal systems and compared it to that of Minnesota. Minnesota is very low and we are way at the top as far as incarcerations. Vrakas replied that if he is not mistaken Minnesota does have some private prisons and these private prisons can do a lot with religious affiliations, etc. that public prisons cannot. In Wisconsin the union is so strong that a private prison would just not be allowed. Correction Corporation of America has taken over the prisons in Washington DC and have totally turned things around based on management and programming perspectives that government run prisons cannot do. Paulson stated that the judges and courts in Wisconsin are putting people in prison and not the unions. Vitale suggested doing some research to determine what is working and successful in other programs and states. Texas had run into the same situation we're looking at with many of the individuals filling their jails for less than major crimes. They have reduced the actual number of prisoners considerably by finding other solutions for the less serious offender. Vrakas said that not only Texas, but Missouri, Arizona and Minnesota have been successful in this same area. He also said that in Wisconsin there are efforts underway for options for the less serious offender crimes. A few years ago, the Day Report Center was a dream and it has been

successful. Schuler stated we have more referrals directly from the court now than people from Huber. These are lesser offender situations, but they would have spent time in jail or in Huber. The other issue is the AODA programming in the jail which is part of the large medical contract that the jail operates. The medical part of the contract is in the Sheriff's budget, but the AODA part is in the CJCC budget. The Sheriff has had to scale back their medical program, but alcohol and drug use is still very much a main reason that caused many of the inmates to commit the crimes they are incarcerated for.

Farrell reiterated that the lack of state funding that then shifts the problem to counties to have to pay for services. There are several ways we can look at this situation and that is a referendum or sales tax to raise more revenue. The board is not recommending this, but it has been discussed. Farrell thanked all members of the board for their work and the staff at Health and Human Services. The Advisory Committees do a great job in keeping the board apprised of issues and compiling their list of needs. He did mention the individual at the Public Hearing who was not happy about the changeover from the county provided waiver program to Family Care. Paulson brought up the sales tax issue and said he would bring it as a county supervisor. The 1/10 of 1% we pay now generates roughly \$6 million for Miller Park and 30% would be coming from people in from other counties which would be approximately \$2 million additional revenue. When they come here now they benefit from our generosity. He doesn't think our financial shortfalls should all be settled by local property tax and the sales tax would be money coming out of other counties as well. We're already backfilling now about \$40 million for state programs that are mandated. He's not saying that these mandates are wrong, but he gets a little upset about the fact that they are not funded by the state so counties must spend lots of money through the property to fulfill those mandates. Farrell said the sales tax would just not fly without significant reductions in property tax. Paulson stated that we can't afford the \$2 million we are short, but getting an additional \$6.4 million for adding 1/10 of 1% sales tax is definitely a start. Vitale asked what is the projection when the Miller Park tax will end – Vrakas said approximately three more years. When that is done, it was sunset and everyone has their eyes on it – Transportation, Parks, Law Enforcement, etc. all want that 1/10 of 1%. Vrakas' stated we pay a huge amount for health insurance. A lot of the schools are in crisis about the insurance costs for teachers, etc. There was discussion about different insurance costs in different areas and agencies throughout the state.

Paulson attended a state conference and he attended a meeting about insurance and he asked why southeast Wisconsin is paying 30% higher premiums for insurance. The speaker said that the healthcare providers in southeast Wisconsin stick close together in terms of demanding such high costs. Dr. Geiss stated there are many pieces to this – insurance companies get 30% off the top for administrative costs and Medicare is about 5%+. He said that everyone would agree that the health system is incredibly broken and needs to be revamped dramatically in order to work. The private insurers don't do anything to keep cost down. CMS (Medicare) has really stepped up in the last few years as far as setting policy. He thinks that in the future it will be the government that will set the standards. The simplest approach would be to let people buy Medicare at 55. It controls costs and many people over 55 are working just for insurance coverage purposes only. Geiss stated that with the high deductibles, people are putting off preventive care and cutting down on the use of their medications. Providers make more money if they do more.

County Executive Vrakas noted that the budget in Madison is not yet finalized – there still may be some changes. The state budget is a two year budget and its all an estimate. The human services part of the budget is not adequate. Schuler stated he's been in contact with Don Maurer who's at the WCHSA conference now. Secretary Helene Nelson (the former secretary) is speaking at the conference. The rumblings you here in the State departments (with the exception of corrections) is that they seem to increasingly be embracing regional approaches to services. Schuler indicated his belief that they have come to the conclusion that between the legislature capping taxes so that local governments cannot put in money to overmatch the human services budgets, to some degree they have lost us as an ever increasing taxing partner. The State always counted on the counties to substitute and supplement for that which the state legislature would not fund. Increasingly, as federal funding is available based upon local levy investments, the state has attempted to keep those federal dollars for themselves or they passed only a portion of it through in the form of block grants, but they targeted that toward program expansion to make programs and services uniform across the state. Schuler stated that at some point in the future the State will probably break up Human Services and make deals with care management organizations and they will reorganize everything into separate silos. According to Vrakas many states don't have county services, they are run by the state. Minnesota and Wisconsin are the only states in this area that have county departments. This is what happened with W-2 and Long Term Care. Next could be child welfare and services for special needs children. It may be very difficult to find someone who would run AODA and Mental Health programs as the private sector quickly realizes that it's not profitable. When the State gives us new federal money and they're going to withdraw it, they have to do it gradually – they can't just cold turkey it. For example we report our expenses to the state for all of our mental health services that have to do with Title 19. We receive a payment that is lower than our actual costs. We report it to the State, they in turn report it to the Feds and the federal government pays that money back, but the state keeps it – they don't give it back to the counties. They did this about four years ago because they were short payments for nursing homes. In the case of WIMCR, this was only supposed to be for a year, but then when that year was up they changed the rules again. While many State career staff are dedicated, there is a belief that many of them are frustrated because they also can't find any way of maintaining or expanding needed services and feel they are losing ground all of the time, and they cannot advocate that the counties get adequate funding from the State because they can't say that. In the past few years, many retirements have occurred in key state positions.

Farrell announced that there will be a state review of the Public Health Department this year and the Board will keep the County Executive informed. Farrell also thanked the staff of Health and Human Services for their ability to work around the lack of funding. Farrell thanked the County Executive for listening to the Board's concerns last year mainly with Public Health and the immunization clinics and the mental health and AODA areas.

Vrakas thanked the Board members for everyone's hard work.

### **Budget Schedule Dates**

Schuler gave the budget schedule dates so that members can put this on their calendars. July 22<sup>nd</sup> and July 23<sup>rd</sup> will be all day presentations and Friday, July 24<sup>th</sup> held open if needed. This will include the CJCC budget as well as all of Health & Human Services. The meetings will

start at 8:30 in the morning and go all day Wednesday and Thursday and Friday, (if needed). We try to wrap up by Thursday afternoon. Schuler stated that with the Long Term Care Division gone, that should shorten it up. According to Vrakas this department is still the largest dollar amount of all departments. Vrakas announced that the ADRC and Veteran's Department is working with Health and Human Services to combine all three departments. John Margowski, our Veteran's Services Officer is retiring at the end of August so we are in the process of recruiting a new Veteran's Services Officer. The ADRC just celebrated year number 1 and everything is going well. One of the reasons for combining the departments is to make it easier to access services. The capital plan in 2010 will contain money for the formal planning of a new Health and Human Services Center. This would include how the building would be organized, where divisions will be placed in relation to one another, reception staff, copiers and printing areas, etc. According to Vrakas, Waukesha County has the largest growing over 60 population and we need a more efficient way to provide services to both seniors and veterans. The goal is to provide these two populations with more services in a cost efficient and streamlined way.

### **Adjournment**

MOTION: Jeskewitz made a motion seconded by Vitale to adjourn the meeting. The motion was voted on and passed unanimously. The meeting adjourned at 1:34 p.m.

Minutes recorded by Kathy Leach

Approved on \_\_\_\_\_  
Date